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FACSIMILE TRANSMISSION

CONFIDENTIAL

DATE: May 12, 2003

CLIENT-MATTER No.: 20662-07121

To:

Name	FAX No.	PHONE NO.		
Examiner James S. McClellan Group Art Unit 3627 Commissioner for Patents	(703) 872-9326	(703) 305-0212 (Examiner) (703) 308-1113 (Receptionist)		

FROM:

Kirk A. Gottlieb

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AMENDMENT A

MAY 1 3 2003

GROUP 3600

Applicants:

Hirohisa A. Tanaka et al.

App. No.:

09/898.497

Filing Date:

July 5, 2001

Title:

METHOD AND APPARATUS FOR LOCATION-SENSITIVE, SUBSIDIZED CELL PHONE

BILLING

Atty. Dkt. No. 20662-07121

Official

CAUTION - CONFIDENTIAL

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> > 20662/07121/SF/5099324.1

T-172 P.002

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			ent and	d Trade	emark Office:	U.S. DEF	PARTMEN	T OF COM	MERCE	
0001/PTO Rev. 10/95	U.S. Department of Commerce Patent and Trademark Office		Application Number			09/898,497				
			Filing Date.			July 5, 2001				
TRANSMITTAL FORM		First Named Inventor			Hirohisa A. Tanaka et al.					
(to be used for all correspondence during pendency of filed application)		Group Art Unit Number			3627					
	E			Examiner Name			James S. McClellan			
Total Number of Pag	ges in This Submission	13	Attorney Docket Number			20662				
	ENCL	OSURES	(ch	eck a	all that app	ly)				
Return Receipt Response to N Assignment & Declaration Power of Attorn Application Dat Information Dis Cople Request for Co Request for Co Amendment A: After Status Request	of Form ck Enclosed Postcard office to File Missing Park Recordation Cover Sheet rey a Sheet closure Statement & PT es of IDS Cited Reference mected Filing Receipt mection of Recorded Ass [10] Pages Final	ts t Q-1449 ces signment]		etter to Chief I corrected Draw [1] Sheef speal Communiterferences speal Communiterferences speal Communiterferences speal Communiterferences speal Communiterferences	smittal Draftspers ving: of Figure unication t unication t Brief, Re of Priority	E [3] To Board of To Group Eply Brief) Document	(s)	ind	
SIGNATURE OF ATTORNEY OR AGENT										
Signature:										
Attorney/Reg. No.: Kirk A. Gottlieb, Reg. No. 42,596			,	Dated:	May	12	, 2003			
CERTIFICATE OF FACSIMILE TRANSMISSION I hereby certify that this correspondence, including the enclosures identified above, is being transmitted on the date shown below via facsimile to: Examiner James S. McClellan, Group Art Unit 3627, Commissioner for Patents, at the Before Final facsimile number indicated below.						e shown re Final				
Signature:	The state of	A R	<u> </u>	ميكسد						
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GROUP 3600

20662/07121/SF/5099321.1

Facsimile Number:

PTCVSB/17 (10-02) (Modified)
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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

EEE TOAMOMETAL	Complete if Known				
FEE TRANSMITTAL	Application Number	09/898,497			
	Filing Date	July 5, 2001			
for FY 2003	First Named Inventor	Hirohisa A. Tanaka et al.			
Patent fees are subject to annual revision.	Examiner Name	James S. McClellan			
Applicant claims small entity status. See 37 CFR 1.27	Art Unit	3627			
TOTAL AMOUNT OF PAYMENT (\$) 0.00	Attorney Docket No.	20662-07121			

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)					
☐ Check ☐ Credit Card ☐ Monoy Order ☐ Other ☒ None ☐ Deposit Account:	3. ADDITIONAL FEES					
Deposit Account Number 19-2555	Lame Er	ntity	Şmall l	Entity	Fee Description Fee	Paid
Deposit Account Name Ferwick & West LLP	Fee Code	Fco (\$)	Fee Code	Fee (\$)		
The Commissioner is authorized to: (check all that apply) ☐ Charge (ee(s) indicated below ☑ Credit any overpayments ☑ Charge any additional fee(s) during the pendoncy of this application	1051 1052 1053 1812	130 50 130 2,520	2051 2052 1053 1812	65 25 130 2,520	Surcharge - late filing fee or oath Surcharge - late provisional filing fee or cover sheet Non-English specification For filing a request for ex parts reexamination	
Charge fee(s) indicated below, except for the filing foo to the above-identified deposit account.	1804 1805 1	920* 1,840*	1804 1805	920° 1,840°	Requesting publication of SIR prior to Examiner action Requesting publication of SIR after Examiner action	
FEE CALCULATION	1251	110	2251	55	Extension for reply within first month	
1. BASIC FILING FEE	1252	410	2252	205	Extension for reply within second month	
Large Entity Small Entity	1253	930	2253	485	Extension for reply within third month	
Fee Fee Fee Fee Fee Paid	i	1,450	2254	725	Extension for reply within fourth month	
Code (5)		1,970	2255	985	Extension for reply within fifth month	 -
1001 750 2001 375 Utility filing fee	1401 1402	320 320	2401 2402	160 160	Notice of Appeal Filing a brief in support of an appeal	
1002 330 2002 165 Design filing fee	1403	280	2402	140	Request for oral hearing	_
1003 520 2003 250 Plant filing fee 1004 750 2004 375 Reissue filing fee		1.510	1451	1.510	Petition to institute a public use proceeding	
1005 160 2005 80 Provisional filing fee	1452	110	2452	55	Petition to revive - unavoidable	
SUBTOTAL (1) (\$) 0		1,300	2453	650	Petition to revive - unintentional	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,300	2501	650	Utility Issue fee (or reissue)	
Extro Cialms Fee from Fee Paid	1502	470	2502	235	Design issue for	
Total Claims 33 -33" 0 × 9 = 0	1503	630	2503	315	Plant issue fee	
Independent 3 -3**= 0 X 42 = 0	1460	130	1460	130	Petitions to the Commissioner	
Mulliple Dependent	1807	50	1807	50	Processing fee under 37 CFR 1.17(g)	
Large Entity Small Entity	1808	180	1806	180	Submission of Information Disclosure Stmt	
Foo Foo Fee Fee Description Code (\$)	8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1202 18 2202 9 Claims in excess of 20	1809	750	2809	3 75	Filing a submission after final rejection (37 CFR 1.129(a))	
1201 84 2201 42 Independent claims in excess of 3	1810	750	2810	375	For each additional invention to be examined (37 CFR 1.129(b))	
1203 280 2203 140 Multiple dependent claim, if not paid	1801	750	2801	375	Request for Continued Examination (RCE)	
1204 84 2204 42 **Reissue independent claims over original patent	1802	900	1802	900	Request for expedited examination of a design application	
1205 18 2205 9 **Roissue daims in excess of 20 and over original patent	Other fee	e (specify	/)			
SUBTOTAL (2) (\$) 0	*Reduced	d by Basic	: Filing Fo	oo Pàid	SUBTOTAL (3) (\$) 0	

SUBMITTED BY				Complete (if applicable)	
Name (Print/Type)	Kirk A. Gottlieb	Registration No. (Altomoy/Agent) 42,596	3	Telephone (415) 875-2414		
Signature	Fr/h.	Long	Date	May	1≥ ,2003	